

**QUALITY ASSURANCE SURVEILLANCE PLAN
for the
IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE)
OFFICE OF DETENTION AND REMOVAL (DRO)**

1. INTRODUCTION

The Government's Quality Assurance Surveillance Plan (QASP) is based on the premise that the service provider, and not the Government, is responsible for the day-to-day operation of the facility and all the management and quality control actions required to meet the terms of the contract. The role of the Government in quality assurance is to ensure performance standards are achieved and maintained. The service provider is required to develop a comprehensive program of inspections and monitoring actions and to document its approach in a Quality Control Plan (QCP). The service provider's QCP, upon approval by the Government, will be made a part of the resultant agreement.

This QASP is designed to provide an effective surveillance method to monitor the service provider's performance relative to the requirements listed in the agreement. The QASP illustrates the systematic method the Government (or its designated representative) will use to evaluate the services the service provider is required to furnish.

This QASP is based on the premise the Government must validate that the service provider is complying with DRO-mandated quality standards in operating, maintaining, and repairing detention facilities. Performance standards address all facets of detainee handling, including safety, health, legal rights, facility and records management, etc. Good management by the service provider and use of an approved QCP will ensure that the facility is operating within acceptable quality levels.

2. DEFINITIONS

Performance Requirements Summary (Attachment D): The Performance Requirements Summary (PRS) communicates what the Government intends to qualitatively inspect. The PRS is based on the American Correctional Association (ACA) Standards for Adult Local Detention Facilities (ALDF) and ICE National Detention Standards (NDS). The PRS identifies performance standards grouped into nine functional areas, and quality levels essential for successful performance of each requirement. The PRS is used by the Government (or its designated representative) when conducting quality assurance surveillance to guide them through the inspection and review processes.

Functional Area: A logical grouping of performance standards.

Contracting Officer's Technical Representative (COTR): The COTR interacts with the service provider to inspect and accept services/work performed in accordance with the technical standards prescribed in the agreement. The Contracting Officer issues a written memorandum that appoints the COTR. Other individuals may be designated to assist in the inspection and quality assurance surveillance activities.

Performance Standards: The performance standards are established in the

DRO ICE NDS and contained in the Detention Operations Manual, at <http://www.ice.gov/partners/dro/opsmanual/index.htm>, as well as the ACA standards for ALDF. Other standards may also be defined in the agreement.

Measures: The method for evaluating compliance with the standards.

Acceptable Quality Level: The minimum level of quality that will be accepted by the Government in order to meet the performance standard.

Withholding: Amount of monthly invoice payment withheld pending correction of a deficiency. See Attachment 1 for information on percentage of invoice amount that may be withheld for each functional area. Funds withheld from payment are recoverable (See Sections 7 and 8) if the COTR and Contracting Officer confirm resolution/correction, and should be included in the next month's invoice.

Deduction: Funds may be deducted from a monthly invoice for an egregious act or event, or if the same deficiency continues to occur. The service provider will be notified immediately if such a situation arises. The Contracting Officer in consultation with the Program Office will determine the amount of the deduction. Amounts deducted are not recoverable.

4. QUALITY CONTROL PLAN:

As a part of its agreement with the Government, the service provider is required to develop, implement, and maintain a Quality Control Plan (QCP) that illustrates the methods it will use to review its performance to ensure it conforms to the performance requirements. (See Attachment 1 for a summary list of performance requirements.) Such reviews are performed by the service provider in order to validate its operations, and assure the Government that the services meet the performance standards.

The service provider's QCP should include monitoring methods that ensure and demonstrate its compliance with the performance standards. This includes inspection methods and schedules that are consistent with the regular reviews conducted by DRO. The reports and other results generated by the service provider's QCP activities should be provided to the COTR as requested.

The frequency and type of the service provider's reviews should be consistent with what is necessary in order to ensure compliance with the performance standards, but no less frequent than what is described in the Government's monitoring instrument/worksheets (See Attachment 3).

The service provider is encouraged not to limit its inspection to only the processes outlined in the Government's standard; however, certain key documents must be produced by the provider to assure the Government that the services meet the performance standards. Some of the documentation that must be generated and made available to the COTR for inspection is listed below. The list is intended as illustrative and is not all-inclusive. The service provider must develop and implement a program that addresses the specific requirement of each standard and the means it will use to document compliance.

- Written policies and procedures to implement and assess operational requirements of the standard
- Documentation and record keeping to ensure ongoing operational compliance with the standards (e.g.; inventories, logbooks, register of receipts, reports, etc.)
- Staff training records
- Contract discrepancy reports (CDRs)
- Investigative reports
- Medical records
- Records of investigative actions taken
- Equipment inspections
- System tests and evaluation

5. METHODS OF SURVEILLANCE

The Government will inspect the service provider's facility and operations using worksheets it developed for this purpose. All facilities will be subject to an annual full facility review using the procedures outlined in the Detention Management Control Program (DMCP) as well as the ACA Standards for Adult Local Detention Facilities (ALDF). The Government's annual full facility reviews will use the monitoring instruments embedded in the standards.

Facilities with 500 beds or more have an on-site COTR and/or designees who will perform regular and more frequent inspections using the worksheet in Attachment 3. This worksheet, which distills some 600 review areas included in the standards, will help the COTR or designee assess overall performance, by reviewing specific items within the 9 functional areas on a daily, weekly, monthly, and/or quarterly basis. Both annual and routine inspections will include a review of the service provider's QCP activities including the reports and results generated by them.

The COTR or designee will evaluate the service provider's performance by (a) conducting site visits to assess the facility and detainee conditions, (b) reviewing documentation, and (c) interviewing the service provider's personnel and/or detainees. NOTE: For day-to-day activities, the Government will conduct its surveillance using the worksheets created for this purpose, along with the Contract Deficiency Reports (CDRs; See Attachment 2) and the "Contract Performance Monitoring Tool" set forth in Attachment 3. Where ICE/DRO standards are referenced for annual review purposes, the "Monitoring Instruments" and "Verification Sources" identified in the DRO standard will be used.

5.1 Site Visits: Site visits are used to observe actual performance and to conduct interviews to determine the extent of compliance with performance standards, and to ensure any noted defects are effectively addressed and corrected as quickly as possible. Sites with 500+ beds will have an on-site COTR designee. Routine reviews may involve direct observation of the service provider personnel performing tasks, interacting with detainees and other staff members, and/or reviewing documentation that demonstrates compliance with the DRO standards. On-site inspections may be performed by the ICE COTR or by other parties designated as representatives of ICE. Inspections may be planned (e.g., annual inspections and the regular inspections identified in Attachment 3) or ad-hoc.

5.2 Ad-Hoc: These inspections are unscheduled and will be conducted as a result of special interests arising from routine monitoring of the service provider's QCP, an unusual occurrence pertaining to the agreement or other ICE concerns. These inspections may also be used as a follow-up to a previous inspection. Inspection findings will be provided to the service provider as appropriate.

When visiting a site, either the COTR or a designated third party may conduct their own inspections of service provider performance activities, or accompany the service provider's

designated Quality Control Inspector (QCI) on scheduled inspections. The COTR may also immediately inspect the same area as soon as the QCI has completed the quality control inspection to determine if any surveillance areas were overlooked. The COTR may also inspect an area prior to the QCI and compare results. The COTR will record all findings; certain deficiencies noted will be provided in writing and must be corrected within a reasonable amount of time (See Attachment 2).

5.3 Review of Documentation: The service provider must develop and maintain all documentation as prescribed in the performance standards (e.g., post logs, policies, and records of corrective actions). In addition to the documentation prescribed by the standards, the service provider must also develop and maintain documentation that demonstrates the results of its own inspections as prescribed in its QCP. The COTR will review both forms of documentation to affirm that the facility conditions, policies/procedures, and handling of detainees all conform to the performance standards stated herein. When reviewing the service provider's documentation, the Government may review 100% of the documents, or a representative sample. Documentation may be reviewed during a site visit, or at periodic points throughout the period of performance.

5.4 Interviews and Other Feedback: The COTR will interview key members of the service provider's staff, detainees and other Government personnel to ascertain current practices and the extent of compliance with the performance standards.

6. FUNCTIONAL PERFORMANCE AREAS AND STANDARDS

To facilitate the performance review process, the required performance standards are organized into nine functional areas. Each functional area represents a proportionate share (i.e., weight) of the monthly invoice amount payable to the service provider based on meeting the performance standards. Payment withholdings will be based on these percentages and weights applied to the overall monthly invoice.

ICE may, consistent with the scope the agreement, unilaterally change the functional areas and associated standards affiliated with a specific functional area. The Contracting Officer will notify the service provider at least 30 calendar days in advance of implementation of the new standard(s). If the service provider is not provided with the notification, adjustment to the new standard must be made within 30 calendar days after notification. If any change affects pricing, the service provider may submit a request for equitable price adjustment in accordance with the "Changes" clause. ICE reserves the right to develop and implement new inspection techniques and instructions at any time during performance without notice to the service provider, so long as the standards are not more stringent than those being replaced.

7. FAILURE TO MEET PERFORMANCE STANDARDS

Performance of services in conformance with the PRS standards is essential for the service provider to receive full payment as identified in the agreement. The Contracting Officer may take deductions against the monthly invoices for unsatisfactory performance documented through surveillance of the service provider's activities gained through site inspections, reviews of documentation (including monthly QCP reports), interviews and other feedback. As a result of its surveillance, the service provider will be assigned the following rating relative to each performance standard:

Rating	Description
Acceptable	Based on the measures, the performance standard is demonstrated.
Deficient	Based on the measures, compliance with most of the attributes of the performance standard is demonstrated/observed with some area(s) needing improvement. There are no critical areas of unacceptable performance
At-Risk	Based on the performance measures, the majority of a performance standard's attributes are not met.

Using the above standards as a guide, the Contracting Officer will implement adjustments to the service provider's monthly invoice as prescribed in Attachment 1

Rather than withholding funds until a deficiency is corrected, there may be times when an event or a deficiency is so egregious that the Government *deducts* (vs. "withholds") amounts from the service provider's monthly invoice. This may happen when an event occurs, such as sexual abuse, when a particular deficiency is noted 3 or more times without correction, or when the service provider has failed to take timely action on a deficiency about which he was properly and timely notified. The amount deducted will be consistent with the relative weight of the functional performance area where the deficiency was noted. The deduction may be a one-time event, or may continue until the service provider has either corrected the deficiency, or made substantial progress in the correction.

Further, a deficiency found in one functional area may tie into another. If a detainee escaped, for example, a deficiency would be noted in "Security and Control," but may also relate to a deficiency in the area of "Administration and Management."

8. NOTIFICATIONS

- (a) Based on the inspection of the service provider's performance, the COTR will document instances of deficient or at-risk performance (e.g., noncompliance with the standard) using the CDR located at Attachment 2. To the extent practicable, issues should be resolved informally, with the COTR and service provider working together. When documentation of an issue or deficiency is required, the procedures set forth in this section will be followed.

- (b) When a CDR is required to document performance issues, it will be submitted to the service provider with a date when a response is due. Upon receipt of a CDR, the service provider must immediately assess the situation and either correct the deficiency as quickly as possible or prepare a corrective action plan. In either event, the service provider must return the CDR with the action planned or taken noted. After the COTR reviews the service provider's response to the CDR including its plan/remedy, the COTR will either accept plan or correction or reject the correction/plan for revision and provide an explanation. This process should take no more than one week. The CDR should not be used as a substitute for quality control by the service provider.
- (c) The COTR and CO, in addition to any other designated ICE official, shall be notified immediately in the event of all emergencies. Emergencies include, but are not limited to the following: activation of disturbance control team(s); disturbances (including gang activities, group demonstrations, food boycotts, work strikes, work-place violence, civil disturbances/protests); staff use of force including use of lethal and less-lethal force (includes inmates in restraints more than eight hours); assaults on staff/inmates resulting in injuries requiring medical attention (does not include routine medical evaluation after the incident); fights resulting in injuries requiring medical attention; fires; full or partial lock down of the facility; escape; weapons discharge; suicide attempts; deaths; declared or non-declared hunger strikes; adverse incidents that attract unusual interest or significant publicity; adverse weather (e.g., hurricanes, floods, ice/snow storms, heat waves, tornadoes); fence damage; power outages; bomb threats; central inmate monitoring cases admitted to a community hospital; witness security cases taken outside the facility; significant environmental problems that impact the facility operations; transportation accidents (airlift, bus, etc.) resulting in injuries, death or property damage; and sexual assaults. Note that in an emergency situation, a CDR may not be issued until an investigation has been completed.
- (d) If the COTR concludes that the deficient or at-risk performance warrants a withholding or deduction, the COTR must include the CDR in its monthly report to DRO Headquarters, with a copy to the Contracting Officer. The CDR must be accompanied by the COTR's investigation report and written recommendation for any withholding. If contractual action including a withholding or deduction is appropriate, DRO headquarters will forward the CDR and supporting information to the Contracting Officer for action. The Contracting Officer will consider the COTR's recommendation and forward the CDR along with any relevant supporting information to the service provider in order to confirm or further discuss the prospective cure, including the Government's proposed course of action. As described in section 7 above, portions of the monthly invoice amount may be withheld until such time as the corrective action is completed, *or* a deduction may be taken.
- (e) Following receipt of the service provider's notification that the correction has been made, the COTR may re-inspect the facility. Based upon the COTR's findings, he will recommend that the Contracting Officer continue to withhold a proportionate share of the payment until the correction is made, or accept the correction as final and release the full amount withheld for that issue.

(f) If funds have been withheld and either the Government or the service provider terminates the agreement, those funds will not be released. The service provider may only receive withheld payments upon successful correction of an instance of non-compliance. Further, the service provider is not relieved of full performance of the required services hereunder; the agreement may be terminated upon adequate notice from the Government based upon any once instance, or failure to remedy deficient performance, even if a deduction was previously taken for any inadequate performance.

(g) The COTR will maintain a record of all open and resolved CDRs.

9. DETAINEE/MEMBER OF PUBLIC COMPLAINTS:

The detainee and the public are the ultimate recipients of the services identified in this agreement. Any complaints made known to the COTR will be logged and forwarded to the service provider for remedy. Upon notification, the service provider will be given a pre-specified number of hours after verbal notification from the COTR to address the issue. The service provider will submit documentation to the COTR regarding the actions taken to remedy the

situation. If the complaint is found to be invalid, the service provider will document its findings and notify the COTR.

10. ATTACHMENTS

 <p>US Department of Homeland Security Immigration and Customs Enforcement Detention and Removal Operations Los Angeles, Field Office</p>	LOS Field Office Operating Instruction LOS XXX	Pages 5
<p>Subject:</p> <p>Los Angeles Field Office Contract Officer Technical Representative (COTR) Contract Deficiency Report (CDR) Reporting Process</p>		

PURPOSE

The Contract Discrepancy Report is used to denote unsatisfactory contractor performance or non-compliance issues. The on-site service provider point of contact (POC) or contractor must respond with a corrective plan of action. Upon receipt of the corrective action plan, the COTR will forward the CDR package to the Contracting Officer for information and action, as deemed appropriate.

PROCESS

Any contractual issue identified as either non-compliant or cited for non-performance will follow the Contract Deficiency Reporting process below:

1. Upon discovery of a non-compliance or non-performance issue with regards to a contract or IGSA, the COTR will prepare a Contract Discrepancy Report and forward it to the facility POC. (Attachment 1) For Deficiency reports for IGSA's, the County or City Official will be provided a copy of the CDR concurrently.
2. The facility POC is given two (2) business days to formally respond in writing to the issue(s) cited by the COTR. The response should outline the issue, note any mitigating circumstances and list any corrective action that has or will be taken. Any deficiency noted for safety or health issues must be given the highest priority for resolution. It is imperative that communications remain open between the parties while the contractor is preparing the response.
3. The COTR sends a copy of the completed CDR package and any associated documents, i.e., investigation reports, memorandums, interviews, etc., to the OAQ Contracting Officer with one copy to the Detention Management Division (DMD) and one copy to the Los Angeles Field Office via email. In the event that a monetary deduction for either non-compliance or non-performance is recommended by the COTR, a

memorandum will be prepared by the COTR fully articulating the reason(s) for the deduction along with specific references to the sections of the Performance Requirements Summary (PRS) table, Contract/IGSA requirements, and/or ICE Detention Standards.

4. Upon receipt, the Contracting Officer will review the CDR to determine if any contractual action or withhold is deemed appropriate. If the recommendation for a withhold or deduction for either non-compliance or non-performance is valid and justifiable, the Contracting Officer will send a letter to the contractor/provider stating the Government's contemplation of a deduction listing the facts, specifics, and reasons for the proposed deduction.

The service provider is given five (5) business days to formally respond in writing to the assigned OAQ Contracting Officer's letter.

5. In the event the Contracting Officer deems a withhold or deduction is warranted, the OAQ Contracting Officer will notify the contractor/provider accordingly. The Contracting Officer will submit a copy of this notification and a completed withhold/deduction form to the Burlington Finance Center for Processing. The COTR and DMD will be provided copies of these communications.
6. The COTR will verify all contractor/provider's invoices reflect any withhold and deductions imposed by the Contracting Officer prior to processing the invoice for payment.

The CDR flow Chart process is addressed at attachment 2. COTRs are required to maintain a current log of all CDRs on the S:Drive, Reporting Folder, COTR Sub Folder (Attachment 3). COTRs will upload and file copies of all completed CDR packages including support documents, contractor responses, and Contracting Officer actions to the S:Drive, Reporting Folder, COTR Sub Folder.

REFERENCES:

- U.S. Immigration and Customs Enforcement Contract and Acquisition Procedure (ICECAP 0408.01.07R1) – COTR Roles, Responsibilities, and Requirements
- U.S. Immigration and Customs Enforcement Contracting Officer's Technical Representative Guidebook; Section 10.5.4 (Corrective Actions) – September 2009

CONTRACT DISCREPANCY REPORT		1. CONTRACT NUMBER	
Report Number:		Date:	
2. TO: (Contractor and Manager Name)		3. FROM: (Name of COTR)	
DATES			
CONTRACTOR NOTIFICATION	CONTRACTOR RESPONSE DUE BY	RETURNED BY CONTRACTOR	ACTION COMPLETE
4. DISCREPANCY OR PROBLEM (<i>Describe in Detail: Include reference in PWS / Directive: Attach continuation sheet if necessary.</i>)			
5. SIGNATURE OF CONTRACTING OFFICER'S TECHNICAL REPRESENTATIVE (COTR)			
6. TO: (COTR)		7. FROM: (Contractor)	
8. CONTRACTOR RESPONSE AS TO CAUSE, CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENT. ATTACH <i>CONTINUATION SHEET IF NECESSARY. (Cite applicable Q.A. program procedures or new A.W. procedures.)</i>			
9. SIGNATURE OF CONTRACTOR REPRESENTATIVE			10. DATE
11. GOVERNMENT EVALUATION OF CONTRACTOR RESPONSE/RESOLUTION PLAN: (<i>Acceptable response/plan, partial acceptance of response/plan, rejection: attach continuation sheet if necessary</i>)			
12. GOVERNMENT ACTIONS (<i>Payment withholding, cure notice, show cause, other.</i>)			
CLOSE OUT			
CONTRACTOR NOTIFIED	NAME AND TITLE	SIGNATURE	DATE
COTR			
CONTRACTING OFFICER			

Attachment 1

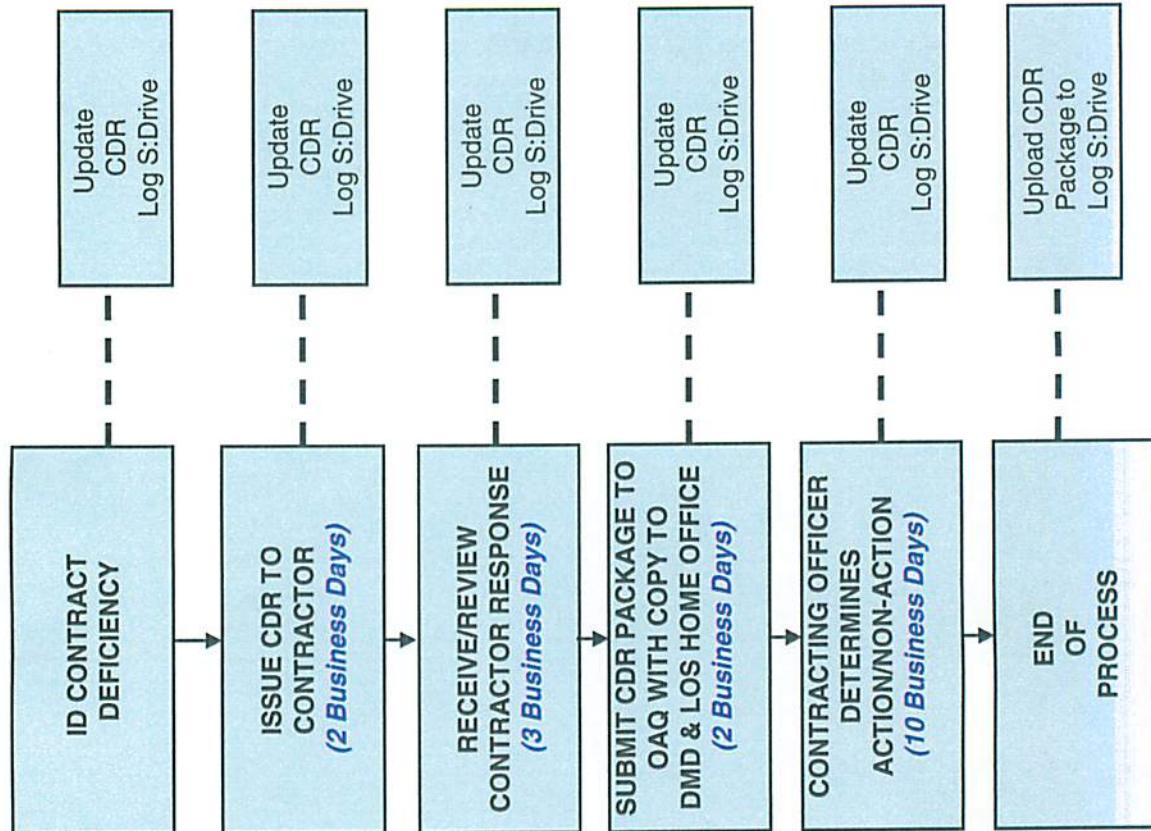
LOS - Field Office Contractor Deficiency Report (CDR) Status Log Orange County

Final Disposition by OAQ

ICE

LOS Field Office

Contract Deficiency Report (CDR) Flow Chart



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Detention and Removal Operations
Contract Performance Monitoring Tool

Facility Name: _____ Month/Year: _____

Frequency		DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
D	W	M	Q				
1. Admission and Release							
		A.	ICE information is available for initial classification				
		B.	Medical screening taking place within timeframes				
		C.	Inventory detainee personal effects				
		D.	Detainee funds accountability in place for admin/release				
		E.	All visual searches documented and are not routine in procedure				
		F.	Appropriate clothing and bedding issued				
		G.	Orientation material in English, Spanish or most prevalent second language				
2. Detainee Classification System							
		A.	All detainees classified appropriately upon arrival				
		B.	Reassessment and reclassification process in place				
		C.	Housing assignments are based upon classification				
		D.	Work assignments are based upon classification system				
		E.	Detainees are assigned color coded uniforms/wrist bands to reflect classification level				
3. Contraband							
		A.	Policy in place for handling contraband				
		B.	Contraband disposed of properly and documented				
		C.	Facility staff make a concerted effort to control contraband				
4. Correspondence and Other Mail							
		A.	Incoming mail screened and delivered daily				
		B.	Outgoing mail screened for contraband				
		C.	Legal mail opened in front of detainee				
		D.	Incoming funds processed properly				
		E.	Rules for correspondence and other mail posted in housing unit or common areas, and detainee handbook				



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Detention and Removal Operations Contract Performance Monitoring Tool

Facility Name: _____ Month/Year: _____

7/6/2010

R=At-Risk
D=Deficient
A=Acceptable

NA=Not Acceptable



Detention and Removal Operations
Contract Performance Monitoring Tool

Facility Name: _____ Month/Year: _____

Frequency	DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
	D	W	M	Q		
9. Environmental Health and Safety						
A.						
B.						
C.						
D.						
E.						
F.						
G.						
H.						
I.						
J.						
K.						
10. Non-Medical Emergency Escorted Trips						
A.						
11. Security Inspections						
A.						
B.						
C.						



Detention and Removal Operations
Contract Performance Monitoring Tool

Facility Name: _____ Month/Year: _____				DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
Frequency	D	W	M	Q					
					D.	Maintain a log of all incoming and departing vehicles			
					E.	Housing unit searches occur at irregular times			
					F.	Area searches documented in log book			
					G.	Daily/Monthly fence checks completed and logged			
					H.	Facility administrator or designee and department heads visit housing units and activity areas weekly			
					I.	Officers monitor all vehicular traffic entering and leaving the facility			
					J.	The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components			
					K.	Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated			
					L.	Daily procedures include: perimeter alarm system tests; physical checks of the perimeter fence; documenting the results			
					M.	Tools being taken into the secure area of the facility are inspected and inventoried			
12. Food Service									
					A.	Appropriate security measures for sharps are in place			
					B.	Appropriate food temperatures are maintained for both hot and cold food			
					C.	Food Service department maintained at a high level of sanitation			
					D.	Detainees receive safety and appropriate equipment training prior to beginning work in department			
					E.	A minimum of two hot meals served daily			
					F.	Facility has a standard 35 day cycle menu			

**Detention and Removal Operations
Contract Performance Monitoring Tool**



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Facility Name: _____ Month/Year: _____

Frequency			DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
D	W	M	Q					
			G.	A registered dietitian conducts nutritional analysis				
			H.	All menu changes documented				
			I.	Common fare menu for authorized detainees				
			J.	Weekly inspections conducted and documented				
13. Funds and Personal Property								
			A.	Inventory personal property/funds is maintained				
			B.	Funds/valuables documented on receipt				
			C.	Detainees property searched for contraband				
			D.	Staff forward arriving detainees medication to medical staff				
			E.	Detainee funds are deposited into the cash box				
			F.	Staff secure every container used to store property with a tamper-proof numbered strap				
			G.	Quarterly audits of detainee baggage & luggage are conducted, verified, and logged				
14. Detainee Grievance Procedures								
			A.	Grievance procedures in place				
			B.	Staff awareness of procedures for emergency grievances				
			C.	Grievance log is utilized				
			D.	Staff forward any grievances alleging staff misconduct to ICE				
			E.	Informal resolution to a detainee grievance documented in detention file				
15. Hold Rooms in Detention Facilities								
			Detainees are not held in hold rooms longer than 12 hours					
			A.	All detainees pat searched prior to placement in hold room				
			B.	Maintain detention log for each detainee in hold room				
			C.					



**Detention and Removal Operations
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Facility Name: _____ Month/Year: _____

Frequency	DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
	D	W	M			
			Q	D.	Written evacuation plan posted for each hold room	
				E.	Hold rooms contain sufficient seating for the number of detainees held	
				F.	No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms	
				G.	Male and females are segregated from each other at all times	
				H.	Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes	
				I.	Officers closely supervise the detention hold rooms. Hold rooms are irregularly monitored every 15 minutes	
	16. Hunger Strikes					
				A.	Procedures for referring detainee to medical if verbally refused or observed refusing to eat beyond 72 hours	
				B.	Staff receive training in identification of hunger strike	
				C.	Process for determining reason for hunger strike	
	17. Key and Lock Control					
				A.	Maintain inventories of all keys/locks/locking devices	
				B.	Emergency keys are available for all areas of the facility	
				C.	Chit system used to issue security equip./keys/radios	
				D.	Policy regarding restricted keys present and followed by staff	
				E.	Facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily	
				F.	Locks and locking devices are continually inspected, maintained, and inventoried	
	18. Access to Legal Material					

Detention and Removal Operations
 Contract Performance Monitoring Tool

Facility Name: _____ Month/Year: _____

				DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
Frequency	D	W	M	Q					
A.	Adequate equipment is available for detainees								
B.	Legal materials/law library current and available for detainees								
C.	Detainee access provided to include SMU								
D.	Denials documented								
E.	Schedule for use implemented 5 hours weekly per detainee								
F.	Access to legal material within 24 hours of written request								
G.	Indigent detainees provided free stamps/envelopes for legal matters								
H.	19. Group Presentations on Legal Rights ICE/DRO approved videos played for all incoming detainees								
I.	Posters announcing presentation appear in common areas at least 48 hours prior to presentation								
J.	Detainees in SMU receive separate presentation								
K.	Facility ensures adequate presentations so all detainees wanting to attend have the opportunity								
20. Marriage Requests									
A.	Marriage written requests approved by FOD								
21. Medical Care									
A.	Intake process includes medical and mental health screening								
B.	Sick call procedures established								
C.	Adequate medical staff available proportionate to population								
D.	Pharmaceuticals stored in a secure area								
E.	All detainees receive physical examination/assessment within 14 days of arrival								
F.	Sick call slips available in English, Spanish and/or most prevalent second language								



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Detention and Removal Operations
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Facility Name: _____ Month/Year: _____

Frequency	W	M	Q	DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
D									
24. Post Orders									
				A.	Every post has a post order, current & signed by the facility administrator				
				B.	Housing unit officers record all detainee activity in a log				
				C.	Supervisor visits each housing area once per shift				
				D.	Staff sign post orders, regardless of whether the assignment is temporary, permanent, or due to an emergency				
				E.	Anyone assigned to an armed post qualifies with the post weapons before assuming post duty				
25. Recreation									
				A.	Outdoor/indoor recreation is provided				
				B.	Access to recreation activities 1 hour x 5 days				
				C.	Staff conduct daily searches of recreation areas				
				D.	In unit sedentary activities are available				
26. Religious Practices									
				A.	Detainees are allowed to engage in religious services				
				B.	Authorized religious items are allowed in detainee possession				
27. Special Management Unit (Administrative Segregation)									
				A.	Written order accompany detainee placed in SMU				
				B.	SMU reviews are conducted in a timely manner (3,7,14,30,60)				
				C.	Detainees in SMU have access to legal materials				
				D.	Detainees in SMU retain visiting privileges				
				E.	Maintain a permanent log regarding detainee related activities				
				F.	SMU phone access same as general pop unless exception is made				

**Detention and Removal Operations
Contract Performance Monitoring Tool**



U.S. Immigration
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Facility Name: _____ Month/Year: _____

Frequency				DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
	D	W	M	Q					
					Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population				
				G.	The facility administrator (or designee) visits each SMU daily				
				H.	A health care provider visits every detainee in a SMU at least 3x week, and detainees are provided any medications prescribed for them				
				I.	Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire				
				J.	When a detainee has been held in Admin Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division				
				K.					
28. Special Management Unit (Disciplinary Segregation)									
					A. Written order accompany detainee placed in SMU				
					B. SMU reviews are conducted in a timely manner (3,7,14,30,60)				
					C. Admin SMU detainees enjoy same privileges as gen pop				
					D. Detainees in SMU have access to legal materials				
					E. Detainees in SMU retain visiting privileges				
					F. Maintain a permanent log regarding detainee related activities				
					G. SMU				
					H. Detainees in disciplinary SMU have access to legal materials				



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	D	W	M	Q		
					I. Detainees in disciplinary SMU retain visiting privileges	
					J. Disciplinary SMU phone access limited to legal/consular calls	
					K. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population	
					L. The facility administrator (or designee) visits each SMU daily	
					M. A health care provider visits every detainee in a SMU at least 3x week, and detainees are provided any medications prescribed for them	
					N. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire	
29. Staff-Detainee Communication						
					A. Housing unit rounds conducted daily by security staff	
					B. Housing unit rounds conducted daily by Deportation Staff	
					C. Detainee requests answered within 72 hours	
					D. ICE SDC visit schedules are posted in housing unit	
					E. Request forms are available to detainees	
					F. There is a secure box available for detainees to place requests in for ICE staff that is checked on a daily basis	
					G. Unannounced ICE staff housing unit visits occur weekly	
					H. Visiting staff observe, document and communicate current climate and conditions of confinement	
30. Suicide Prevention and Intervention						
					The facility has a written suicide prevention and intervention program approved and signed by the health authority and facility administrator which is reviewed	
					A. A=Acceptable D=Deficient R=At-Risk NA=Not Acceptable	



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D										
				Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program and annually thereafter						
				B. The facility has a designated and approved isolation room for evaluation and treatment						
				C. Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes						
				D.						
31. Telephone Access				Upon intake, detainees are made aware of phone policies						
				A.						
				B.						
				C.						
				D.						
				E.						
				F.						
				G.						
				H.						
				I.						
32. Terminal Illness, Advanced Directives, and Death				Detainees who are chronically or terminally ill are transferred to an appropriate off-site facility						
				A.						
				B.						
				C.						
				D.						

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Frequency			DETENTION STANDARD								RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
D	W	M	Q										
				A.	Tool inventories conducted as specified								
				B.	Tools marked and readily identifiable								
				C.	Procedures for issuance of tools to staff and detainees								
				D.	Inventory made of all tools by contractors prior to enter and exit								
				E.	There is an individual who is responsible for developing a tool control procedure and an inspection system to ensure accountability								
				F.	A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board								
				G.	Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner								
				H.	Department heads are responsible for implementing proper tool control procedures as described in the standard								
33. Tool Control													
34. Detainee Transfer													
Detainee provided with detainee transfer notification													
				A.	form								
				B.	Health records/transfer summary accompany detainee								
				C.	Funds and personal property accompany detainee								
				D.	A-File/work folder accompany detainee								



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Frequency	W	M	Q	DETENTION STANDARD			RATING A-D-R-NA	Corrective Action Required / Comments	Due Date
D									
				37. Visitation					
				Written visitation schedule posted and accessible to the public					
				A. General visitation log book maintained					
				C. Visitor dress code enforced					
				D. Legal visitation available 7 days a week					
				E. Facility complies with visitation schedule					
				F. Visitors are searched and identified per standards					
				G. Current list of Pro Bono services posted in detainee housing					
				38. Voluntary Work Program					
				A. Facility has a voluntary work program					
				B. Maintain a written chart with work assignments/classification level					
				C. Facility complies with work hour and pay requirements for detainees					
				D. Detainees are medically screened to participate					
				E. Detainees receive proper training and safety equipment					
				F. Detainee housekeeping meets standards for neatness, cleanliness and sanitation					